

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2						
3						
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50						
TOTAL IND.	1					
TOTAL DEP.	79	↔	↔	↔		
TOTAL CLAIMS	80	████████	████████	████████		

	CLAIMS					
	IND	DEP	IND	DEP	IND	DEP
51	2					
52	3					
53	3					
54	3					
55	3					
56	3					
57	3					
58	3					
59	2					
60	3					
61	1					
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100						
TOTAL IND.						
TOTAL DEP.		↔	↔	↔		
TOTAL CLAIMS		████████	████████	████████		